

Religious Ministry Support  
REFERENCE / AUTHORITYSOURCE DOCUMENT  
Information Sheet

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TITLE: IMMUNIZATION WAIVERS

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Purpose: Defines the policy and procedures for processing the subject requests. (Includes chaplain's requirements)

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# MILPERSMAN 6320-010

## Immunization Waivers

<b>Responsible Office</b>	BUPERS (Pers-271)	Phone: DSN	224-2418
		COM	(703) 614-2418
		FAX	(703) 697-6562
<b>Governing Directive</b>	BUMEDINST 6230.15		
<b>Reference</b>	NAVPERS 1070/613, Administrative Remarks		
<b>Policy</b>	Waivers of immunization are granted for administrative reasons and will ordinarily be granted only in the case of legitimate religious objection to immunization.		
<b>Authority</b>	Authority to grant permanent waiver of immunization requirements is vested in the Surgeon General of the Navy, and delegated to the Chief, Bureau of Medicine and Surgery (BUMED) Washington, D.C. Exemption from immunization requirements for medical reasons may be granted by BUMED.		
<b>Application</b>	Procedure Members requesting waiver of immunization requirements will forward a request of BUMED-24, via the member's CO, and the Chief of Naval Personnel (Pers-45).		

### **Contents of Request**

The request will include the following:

- Full name, grade, SSN (and designator for officers);
- Name of the recognized religious group and the date of the applicant's affiliation;
- Supporting certification signed by an authorized personal religious counselor (such as their minister) who attests that:
  - Applicant is presently an active member of the espoused religious group in good standing;
  - Applicant regularly adheres to tenets consistent with espoused religious beliefs;
  - The religious group has a tenet or belief opposing immunizations; and

- The religious counselor believes that the member is sincere in commitment to this religious faith.
- Recommendation from a chaplain who has counseled the applicant; and
- A statement (officers) or a NAVPERS 1070/613, Administrative Remarks, entry (enlisted) in the following format:

“I have requested a waiver of the immunization requirement(s) for the prevention of (name of disease). I hereby state that my request is based upon (religious objection to immunization) (other reasons specifically described). I acknowledge the following counseling:

- (1) Failure to obtain immunization poses additional risk to my health on exposure to disease.
- (2) If I contract a disease for which the above mentioned immunization(s) (is/are) prescribed, any hospitalization resulting therefrom could constitute time lost from active duty which must be made up.
- (3) Any disability resulting from the aforementioned disease could deny me entitlement to any disability benefits that otherwise might accrue as a result of naval service.
- (4) In the event of foreign travel, I may be detained during travel across foreign borders due to international health regulations.
- (5) If granted, any waiver may be revoked by my commanding officer, if I am subsequently considered by competent authority to have imminent risk of disease.

(Member’ s signature)

Witnessed.”

**Applicant Counseling**

CO’ s will ensure that applicants are counseled concerning the following:

- The additional risk to health on exposure to disease against which the applicant will not be protected;
- The possibility that the applicant may be detained during travel across international borders due to international health regulations; and
- The possibility that individuals granted such waivers may have their waiver revoked if they are at imminent risk of disease (i.e., exposure to smallpox, measles, cholera, etc.) and/or due to international health regulations.

**Revocation of Waiver by CO**

CO’ s may, without prior approval by BUMED, revoke a member’ s authorized immunization waiver in the event of imminent risk of disease due to exposure or as a result of international health regulations incident to foreign travel. If a member’ s immunization waiver is revoked, such action is to be reported to the Director of Naval Medicine/Surgeon General of the Navy (N093), BUMED-24, Pers-45 for officers, and: Pers-27 for enlisted personnel, by message as soon as possible.

